

An Ounce of Prevention

t was Benjamin Franklin, one of the founders of our nation, who coined the famous saying: "An ounce of prevention is worth a pound of cure." It's such a worthwhile bit of advice that today, more than 200 years later, it's still quoted regularly to admonish us to take care of our health and avoid habits that can lead to illness and disease. Many of us certainly heard it from our parents and passed it along to our own kids.

Well, that's still good advice, but what Franklin was talking about when he made the statement had nothing whatsoever to do with taking care of our health. A Pennsylvania resident for much of his life, he had organized Philadelphia's Union Fire Company in 1736, and his now-famous statement was simply advice on how to prevent fires.

Nevertheless, there's never been any better advice for carefully guarding our health, which is why we've chosen it as the theme for this issue. That proverbial "ounce of prevention" can not only lower our medical bills, but it can also lead to a healthier and more enjoyable lifestyle and increased longevity.

Our vision for the VA Sierra Pacific Network is to operate an integrated veterans' health care system that is recognized as the model for health care delivery for the 21st century. A key component of that system is our commitment to helping you develop and maintain that "ounce of prevention" philosophy.

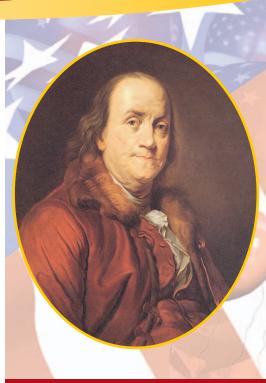
Preventive health care takes many forms, from regular exercise to good nutrition, from promoting the cessation of smoking and other substance programs to screening for a variety of diseases, including cancer and diabetes, from emphasizing periodic medical and dental checkups to encouraging healthier lifestyles. In each of these areas, as well as many others, we have the resources to help you live better and healthier lives.

For example, the American Heart Association reports that one in four American adults has hypertension (high blood pressure). Hypertension patients are at far greater risk for stroke, heart attack, heart failure, kidney disease and blindness.

Because the physical signs of hypertension are not always obvious, many patients don't follow their physician's health, dietary or exercise recommendations, or they start off with good intentions but then slip back into bad habits.

Here's just one way we can help. Mary Goldstein, MD, MS, a professor of medicine (general internal medicine) and, by courtesy, of health research and policy at the VA Palo Alto Health Care System, oversees our Group Visits to Improve Hypertension

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Coping with Traumatic Stress Reactions

hen you take action to cope with stress reactions and trauma-related problems, you begin to feel less helpless, and put yourself in a position of power. The recovery process is an ongoing, gradual one, not a sudden cure. Some amount of continued reaction to the traumatic event(s) is normal. Healing doesn't mean forgetting traumatic war experiences or having no emotional pain when thinking about them.

Healing may mean fewer or less disturbing symptoms, greater confidence in your ability to cope with your memories and reactions, or an improved ability to manage your emotions.

Behaviors that DON'T Help

These are behaviors you should not use to cope:

- · Using drugs and alcohol.
- Avoiding other people.
- Dropping out of pleasurable or recreational activities.
- Using anger to control others. Anger helps keep them away.
- Avoiding people, places or thoughts that remind you of the traumatic event.
- Working all the time to try and avoid distressing memories.

Behaviors that CAN Help

Here are some suggestions for coping with any of the following symptoms:

Unwanted distressing memories, images, or thoughts about the trauma

• Remind yourself that they're just that – memories – and that they're natural. They can feel overwhelming, but often lessen with time.

Sudden feelings of anxiety or panic

• These are a common part of traumatic stress reactions and include sensations of your heart pounding and feeling lightheaded or spacey (usually caused by rapid breathing). Scary thoughts (I'm going to die; I'm having a heart attack, etc.) make them especially upsetting. Slowing down your breathing may help. And remember that these reactions aren't dangerous, and should soon pass.

Having flashbacks

- Keep your eyes open. Look around and notice where you are.
- Talk to yourself. Remind yourself where you are, what year you're in, and that you're safe.
- Get up and move around, and remember that this is a common traumatic stress reaction.

 $\begin{array}{c} Trauma\text{-}related\ dreams\\ and\ nightmares \end{array}$

• If you awaken from a nightmare in a panic, remind yourself that you're reacting to a dream, not because there's real danger now. Consider getting out of bed, regrouping and orienting yourself. Engage in a pleasant, calming activity (e.g., listen to soothing music).

Difficulty falling or staying asleep

- Keep to a regular bedtime schedule, and avoid strenuous exercise for the few hours before bedtime. Don't use your sleeping area for anything other than sleeping or sexual intimacies.
- Avoid alcohol, tobacco and caffeine, and don't lie in bed thinking or worrying. Get up and enjoy something soothing or

pleasant; read a calming book, drink a glass of warm milk, or do a quiet hobby.

Irritability, anger and rage

- Take a time out to cool off or think things over. Walk away from the situation.
- Get in the habit of exercising daily. Exercise reduces body tension and helps get the anger out in a positive and productive way. Remember that staying angry only increases your stress and can cause health problems.
- Take classes in anger management. If you blow up at family members or friends, talk to them about it as soon as you can. Let them know how you feel and what you're doing to cope with your reactions.

Difficulty concentrating

- Slow down. Give yourself time to focus on what you need to learn or do.
- Write things down. Making todo lists may be helpful. Break tasks down into small doable chunks, and plan a realistic number of events or tasks for each day.

Difficulty feeling or expressing positive emotions

- Be aware that this is a common reaction to trauma; you're not doing it on purpose, and shouldn't feel guilty for something you don't want to happen and can't control.
- Make sure to regularly participate in activities you enjoy or used to enjoy.
 Sometimes, they can rekindle feelings of pleasure.
- Take steps to communicate your caring to loved ones in little ways: write a card, leave a small gift, or phone someone and say hello.

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Prevention

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Management program, a study to test group treatment for patients with hypertension. "The program groups patients with shared health issues—in this case, hypertension—in the hope that it will improve their ability to selfmanage their care," she says.

The patients meet monthly with their primary care clinician at the VA Palo Alto Health Care System. Each patient has his or her blood pressure taken while meeting individually with a nurse practitioner. Patients are encouraged to bring a friend, partner, or spouse to the sessions.

The group discusses medication, diet,

exercise and other concerns. "Some patients are more comfortable talking in a group setting and learning that they are not the only one experiencing certain issues or side effects," says Dr. Goldstein. "The emphasis is on open discussion and education."

Time is set aside for private consultations with the doctor if needed. "Patients end up seeing their primary care doctor more frequently," she reports, "since the group meets monthly, and the usual schedule for hypertension patients who are not having any issues is every six months or so."

Dr. Goldstein says the program works under the premise that an informed and motivated patient,

working in conjunction with health professionals, will work toward goals that enhance the patient's feeling of competence in taking care of his or her health.

The success of the group hypertension study is being measured by monitoring several factors, including: blood pressure changes in the participating patients; their

adherence to medication; their satisfaction with the program; physician and nurse satisfaction with the level of care the patients receive; and the benefits of giving consolidated services.

The 18-month-old study, run by the Geriatrics Research Education and Clinical Center, is in its third round of six-month sessions, with each round increasing in the number of participants enrolled. ■

Higher Limits in VA Home Loan Program America's veterans and their

America's veterans and their families now have a greater chance to make their dreams of home ownership a reality, thanks to an increase in the Department of Veterans Affairs (VA) home loan guaranty limit. Effective January 1, 2006, changes in the loan guaranty limits will mean veterans are able to get no-down payment loans up to \$417,000. The previous ceiling was \$359,650. More information is available on the Web at www.homeloans.va.gov, or by calling 1-800-827-1000.

VA National News

VA Health Care Rated High

Veterans continue to be more satisfied with their health care than the average American, according to an annual report on customer satisfaction that compares the VA health care system with private-sector health care. The ratings came in the annual American Customer Satisfaction Index (ACSI) and mark the sixth consecutive year VA's health care system has outranked the private sector.

National Rehabilitation Special Events

Physical activity, friendly competition and recreation therapy can contribute significantly to an improved quality of life. VA's four national rehabilitation special events provide disabled and elderly veterans with challenging opportunities to accomplish feats many may have believed were no longer available to them because of age or disability. These sports and leisure activities provide unique environments for self-development, camaraderie and a well-earned sense of accomplishment. The dates and locations of these events are listed in the box to the left. ■

National Veterans Events

• 20th National Disabled Veterans Winter Sports Clinic April 2–7, Aspen, Colorado

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- 20th National Veterans Golden Age Games May 7–12, Hampton, Virginia
- 26th National Veterans Wheelchair Games July 3–8, Anchorage, Alaska
- 2006 National Veterans Creative Arts Festival October 16–22, Rapid City, South Dakota

northern california

VA facility highlights

New Cath Labs are Most Advanced in the World

The VA Palo Alto hospital just opened two new cardiac catheterization laboratories, which employ new digital detector technology – the most advanced units of their type in the world.

The new laboratories provide substantial benefits to veterans, including reducing waiting time for procedures and

improved diagnostic abilities, especially in very large patients. The new technology allows the cardiologists to perform interventions in patients who were previously not felt to be candidates for these therapies. The new laboratories offer hope of life-saving therapies to another segment of our patient population.

One laboratory contains a GE Innova 3100 and possesses both cardiac and peripheral vascular capabilities for diagnostic imaging and therapeutic interventions, such as angioplasty and stent placement. The second laboratory contains a GE Innova 2100, which is the third such unit installed in the



United States and is the first unit of its type west of the Mississippi. This unit possesses a number of sophisticated imaging capabilities to improve patient safety.

Partnerships Help VA Reach Out to Homeless Veterans

Earlier this year, after being selected as one of 16 VA sites to receive funding through a national competitive grant process, VANCHCS implemented a new Special Needs Program at the Oakland Army Base. The new program is a successful collaboration between VANCHCS and Operation Dignity, a local nonprofit

 $transitional\ housing\ program.$

The goal of the program is to support homeless veterans with severe psychiatric conditions, by providing temporary housing and community case management services, so they are able to eventually move to and remain in permanent housing. Veterans are first assessed by program team members, consisting of health care providers, social workers and housing specialists, who use a case management model called Critical Time Intervention which focuses on successfully

transitioning individuals from one setting to another.

Team members assist veterans with finding temporary and permanent housing and also assist with very practical living issues, such as medication compliance and budgeting, with the goal of helping them do these things with less support.

For more information, call the Special Needs Program Coordinator, Tracy Cascio, LCSW, at 510-587-3405. ■

New CT Scanner Installed

The VA Central California
Health Care System
(VACCHCS) has recently
installed a State of the Art
Toshiba Aquilion 64
Detector Computed
Tomography (CT) Scanner
which currently represents
the most advanced CT
scanner available in
diagnostic imaging. The
new scanner replaces the
older Toshiba CT scanner
and provides

exceptionally high resolution image quality, while reducing scan time of any organ or region to just seconds.

The scope of diagnostic imaging has vastly improved CT angiography, virtual colonoscopy, brain profusion and cardiac imaging, such as coronary arteriography. Malcolm Anderson, MD, Chief, Imaging Service, states: "We can now offer patients an alternative to invasive procedures such as coronary

angiography by using these finely layered pictures reconstructed into 3-D images from a single CT scan, while holding just a 10-second breath."

Director Al Perry states: "The Fresno VA is the only hospital in Central California with this new equipment and further demonstrates VA's commitment to provide the best health care available to our nation's military heroes."

san francisco

sierra nevada

pacific islands

Disease Prevention—Job Number One

Disease prevention at SFVAMC is one of our highest priorities. Like all VA health care facilities, we use specific guidelines to manage disease prevention and conditions such as high cholesterol, high blood pressure and diabetes, and for cancer screening. These clinical practice guidelines ensure high quality care for our veterans.

We have an active smoking cessation program for veterans

who want to quit smoking. Some of our clinical research staff are conducting studies to promote smoking cessation. These studies include the use of bupropion, an antidepressant medication for hospitalized smokers, and pager messages and hypnosis for non-hospitalized smokers.

Don't forget, it's still flu season. Veterans can still get a flu shot and should check with their doctor or nurse regarding any other recommended vaccinations. So far this flu season we have

vaccinated more than 11,000 veterans.

Our MOVE/Healthy Weight program promotes regular exercise and healthy nutrition, resulting in healthier veterans. More than 80 percent of the veterans enrolled in the program report significant improvements in their physical activity and eating habits, and 50 percent say they are continuing to lose weight following the end of the group sessions. Call the Nutrition Clinic at 415-221-4810, extension 3354, for more information.

Want to Quit Smoking? We're Here to Help

Quitting smoking can be challenging, but it's well worth the effort. If you're ready to improve your health, we're here to help you. VASNHCS has a number of smoking cessation programs. Our newest program, Telequit, provides support for participants through telephone counseling.

Telequit is in addition to other more traditional offerings, such as in-person individual and group therapy programs.

Telequit may be successful for veterans who are working or otherwise too busy for regular in-person visits with a provider at our hospital or clinics. The provider can deliver support and guidance through telephone visits, and may also include the use of medications. Some veterans may be required to make a co-payment for medications.

Quitting smoking has many benefits, including a significant reduction in heart attacks and strokes. If you're ready to try a new approach to quitting smoking, please contact Deland Peterson, Ph.D., at 775-786-7200, extension 1328. ■

Senators Holds Hearings on VA Health Care in Hawaii

In January, the U.S.
Senate Veterans' Affairs
Committee held more than
10 hours of field hearings
in Hawaii on the islands
of Kauai, Maui, Oahu and
the Big Island. Two of
the hearings were chaired
by Committee Chairman
Senator Larry Craig
(R-ID), and two by
Hawaii's senior senator,

ranking minority member of the committee.

The hearings featured testimony from VA officials, including Under Secretary for Health Dr. Jonathan Perlin, health care

Daniel K. Akaka, the

professionals in the community, representatives from veteran service organizations and non-VA organizations, and individual veterans. The focus of the hearings was on long-term care, services on Maui, Molokai and Lanai, Post-Traumatic Stress Disorder, and services for those returning from active duty.

The hearings were well attended. Veterans were generally very happy with the quality of care they receive from VA in Hawaii, and veterans, veterans' organizations, and non-VA organizations would like to have



the level of health care services increased – especially on the neighbor islands of Kauai, Maui, Molokai, Lanai and the Big Island. Both Senators Craig and Akaka praised VA care, and noted that it's rated the highest in the country.

A Laughing Matter: An Ounce of Prevention

n keeping with the theme of this issue, Dr. Lulu Looney answers the following questions on living a healthy lifestyle:

Q: I've heard cardiovascular exercise can prolong life. Is this true?

- A: Your heart is only good for so many beats, and that's it. Don't throw them away on exercise. Everything wears out eventually. Speeding up your heart will not make you live longer; that's like saying you can extend the life of your car by driving it faster. Want to live longer? Take a nap.
- Q: What's the secret to healthy eating?
- A: Thicker gravy.

Q: Should I cut down on meat and eat more fruits and vegetables?

- A: What does a cow eat? Hay and corn. And what are these? Vegetables. So a steak is simply an efficient mechanism of delivering vegetables to your system. Need grain? Eat chicken. Beef is also a good source of field grass (green leafy vegetable).
- Q: Aren't fried foods bad for you?
- A: You're not listening. Foods are fried these days in vegetable oil. In fact, they're soaked in it. How could getting more vegetables be bad for you?

- Q: How can I calculate my body/fat ratio?
- A: Well, if you have a body, and you have body fat, your ratio is one-to-one. If you have two bodies, your ratio is two-to-one, etc.
- Q: Will sit-ups help prevent me from getting a little soft around the middle?
- A: Definitely not! When you exercise a muscle, it gets bigger. You should only be doing sit-ups if you want a bigger stomach.

I hope this has cleared up any misconceptions you may have had. ■

ORD SEARCH

R R Ν J Ε T 0 0 N G Ε Ν S Ν Н S S D S V Q C D C R S G Ε S Ε Z E Z В U C 0 C 0 D Ε S G U Ε N Q Q Ε Ε M G Y G A Q Q X K C M C Ε Q W D G G S S Y Z M Ε S Ε 0 S В Υ 0 В Z Α D C C Q

AWARENESS LIFESTYLE CANCER LONGEVITY CHECKUPS
MAMMOGRAM
EDUCATION
NUTRITION

EXERCISE
PREVENTION
HABITS
RESPONSIBILITY

HEALTHY
SCREENING
HYPERTENSION
WEIGHT



Breast Cancer: Risk Factors and Early Detection

By Cheryl Wenell, RN, NP, MSN Comprehensive Women Veterans Health Center, SFVAMC

reast cancer is the most common cancer in women and is the second leading cause of cancer death in women of all ages. This year, an estimated 180,000 new cases of breast cancer will be diagnosed.

While the majority of women who develop breast cancer have no special risk factors, some of the known factors include: being female, increasing age, family history of breast cancer in a mother or sister, early start of menstruation (before age 12), late onset of menopause (after age 55), pregnancy and childbirth after age 30, or not at all, and alcohol use (2-3 drinks per day).

In those patients with a strong family history of breast cancer, researchers have found that it may be due to genetic mutation in two genes—BRCA1 and BRCA2. Other factors which may be associated with increased breast cancer risk are postmenopausal hormone therapy (estrogen plus progestin) and being overweight after menopause. Factors that may be associated with a decreased risk of breast cancer include breastfeeding, regular exercise

and maintaining ideal body weight.

Since there are only a few prevention practices to decrease a woman's risk of breast cancer, most efforts today are aimed at screening women for early detection. The most effective screening test at this time is a mammogram. Mammograms are recommended for all women age 50-69 every one to two years.

Controversy exists regarding the benefits of mammography in women ages 40-49. This is based on the question of whether the risks of having a mammogram (such as the need for more mammograms, other tests, biopsies and unnecessary surgery) outweigh the benefits. The Veterans Health Administration mammography screening directive supports emphasizing the usefulness of this test in the 50-69 age group, while individualizing recommendation for it in the 40-49 year age group.

For women ages 70 and older, there is also insufficient evidence to recommend screening. Women in this age group should discuss this decision with their health care provider.

Traumatic Stress

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A Final Word

Experiment with these ways of coping to find which ones are helpful to you. Practice them; like other skills, they work better with practice. Whenever you're

experiencing any of these symptoms, talk to family members, friends, your counselor or doctor about them. In some cases, medication can provide relief. Reach out to people who can help, in the VA, Vet Centers, your family and your community. You're not alone.

The Dentist: Key Member of Your Health Care Team

our dentist can play a key role in your preventive health care program. Regular dental checkups are important for maintaining healthy teeth and gums, but can pay other dividends. The American Heart Association warns that individuals with chronic infections like gum disease have a greater risk of developing hardening of the arteries and coronary heart disease. Without regular checkups, gum disease, which is often painless, may go undetected until considerable damage occurs.

Dentists can also detect early warning signs of other diseases, including cancer, diabetes, pneumonia and a variety of rare skin and autoimmune diseases. In short, they can save your life.

Important Reminder

everal of our VHA facilities report that a lot of mail sent to veterans is returned because of bad addresses or other reasons. Please be sure that you and any caregivers or others with authority to act on your behalf keep your local VHA facility up-to-date on your current address, contact information, veteran status, etc. Thank you!

Correction

n our last issue, we stated that a 12-ounce soft-drink [non-diet] can contain up to 40 grams of sugar. So far, so good! Unfortunately, we equated that amount to about two teaspoons. In fact, 40 grams of sugar equals about ten teaspoons, five times as much as we reported. No wonder the Center for Science in the Public Interest labeled such drinks "liquid candy." We apologize for the error.



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Where to find us!

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DOWNTOWN S.F. VA OPC

401 3rd Street San Francisco, Calif., 94107 (415) 551-7300

VA EUREKA OPC

714 F Street Eureka, CA 95501 (707) 442-5335

SAN BRUNO VA OPC

1001 Sneath Lane San Bruno, Calif., 94066 (650) 553-8000

VA SANTA ROSA OPC

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5342 Dudley Boulevard McClellan Park, CA 95652-1074 (916) 561-7400

■ VA MARE ISLAND OPC

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VA STOCKTON OPC

500 W. Hospital Road Stockton, CA 95231 (209) 946-3400

VA MODESTO OPC

1524 McHenry Blvd., Suite 315 Modesto, CA 95350 (209) 557-6200

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3401 Engineer Lane Seaside, CA 93955 (831) 883-3800

VA SAN JOSE OPC

80 Great Oaks Boulevard San Jose, CA 95119 (408) 363-3011

VA SONORA OPC

19747 Greenley Road Sonora, CA 95370 (209) 588-2600

VA CENTRAL CALIFORNIA HEALTH CARE SYSTEM

2615 E. Clinton Avenue Fresno, CA 93703-2286 (559) 225-6100

VA SOUTH VALLEY OPC

1050 North Cherry Street Tulare, CA 93274 (559) 684-8703

VA CASTLE OPC

3605 Hospital Road, Suite D Atwater, CA 95301-5140 (209) 381-0105

VA SIERRA NEVADA HEALTH CARE SYSTEM

1000 Locust Street Reno, NV 89502-2597 (775) 786-7200

■ VA SIERRA FOOTHILLS OPC

11985 Heritage Oak Place Suite #1 Auburn, California 95603 (530) 889-0872

■ VA CARSON VALLEY OPC

925 Ironwood Drive, Suite 2102 Minden, NV 89423 (888) 838-6256

VA PACIFIC ISLANDS HEALTH CARE SYSTEM

459 Patterson Road Honolulu, HI 96819 (808) 433-1000

VA HILO PTSD RESIDENTIAL REHABILITATION PROGRAM

891 Ululani Street Hilo, HI 96720 (808) 969-1684

VA MAUI OPC

203 Ho'ohana Street, Suite 303 Kahului, HI 96732 (808) 871-2454

VA Inpatient Facilities with Outpatient Clinic

VA Outpatient Clinics

Northern California

Central California

Sierra Nevada

Pacific Islands

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VA HILO OPC

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■VA KAUAI OPC

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US Naval Hospital Wing E-200, Box 7608 Agana Heights, GU 96919 (671) 472-7250

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